APHIS



Partnership In Education Program 2002 - 2003

Participation Form

FOR HEADQUARTERS PARTNER SCHOOLS HTTP://www.aphis.usda.gov/mb/mrphr/4630sdsf.html#introduction

Part $A \sim W$ ho you are and what you have to offer

Please print the following information:							
Name:		Program:	Unit #:				
		Phone:					
Special Skills	You'd Like to Share:						
Interests/Hol	obies:						
		YOUR PARTICIPATION AND A					
2. I'd like to	share a student with and	other employee:					
A. M B	y APHIS co-mentor/tuto Please assist me wi	or is: ith finding someone with whom	n to share a student.				
3. I woul	ld like to volunteer at the	e following school:					
	Hyattsville Elementary Hyattsville Middle Sch Northwestern High Sch Wherever I am most ne	ool (HMS) hool (NHS)					
4. I am a	returning mentor/tutor	and would like to return to the	same school as last year:				
	HES HMS	NHS					

5.	As a returning mentor/tutor, I would like to work with the same student(s):				
	Student Name(s):				
6.	I am a new volunteer who was recruited by Employee Recruiter's Name				
7.	I have discussed this with my supervisor and he/she concurs with my participation				
	Supervisor's Signature:				
	Supervisor's Name Printed:				

For additional information, please contact one of the following Partnership In Education Program Council Members:

Chairperson: Carmen Queen-Hines, MRPBS, 301-734-5579

Members: Dan Dove, WS, 301-734-4861

James Ivy, LPA, 202-690-0040 Holly O'Brien, LPA, 301-734-4381 Kim Ogle, PPD, 301-734-8861 Jean Reese, MRPBS, 301-734-8657 Penelope Rhone, PPD, 301-734-4370 Ayanna Smith, CPR, 301-734-3161 Gwendolyn Smith, CREC, 301-734-5584 Kathy Wright, PPQ, 301-734-5405

Please complete this form and return to: Carmen Queen-Hines Unit 21 ~ Suite 2B36 FAX 301-734-5100

